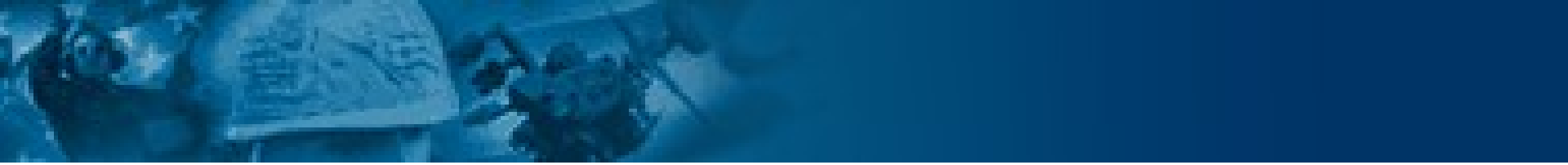


Leading Change: *Implementing AHLTA*

LTC Wooldridge

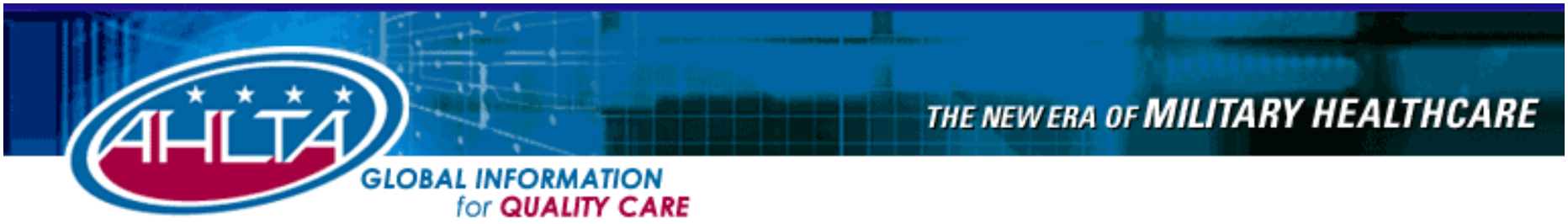
Commander, USAHC Darmstadt

9 December 2005

TRICARE Europe

How do you . . .

. launch the largest computeriz
healthcare system in the world?



From the Clinic Up

Background

- **Population Served = 7,000**
  - **3,100 AD 3,500 ADFM 400 Ret & FM**
- **No Organic Medical Capability in Darmstadt**
  - **Ambulatory Care Clinic that sees it all**
- **Greatly Improved Access**
  - **Upward Trend in Monthly Visits: 1,800 Jun 04 to 2,700 Mar 05**
- **8 Providers + 12 Medics/CNAs**
  - **80% Churn since Mar 05**
- **JCAHO Survey in May 05**

Building the Framework

- **Internal Ownership**
  - **Create Common Vision**
  - **Plan Collectively**
    - **Templates, Training & Timing**
  - **Problem-Solve Together**
    - **Access, Productivity & Quality**
    - **What's our JCAHO Story?**
- **External Appreciation**
  - **Proactively Communicate**
    - **Long-Term Benefits & Short-Term Impacts**

Sample Communications

Clinic Signs & Trifolds

Community Updates & AFN

Web Links

http://www.ha.osd.mil/ahlta/

Welcome to Darmstadt Health Clinic!

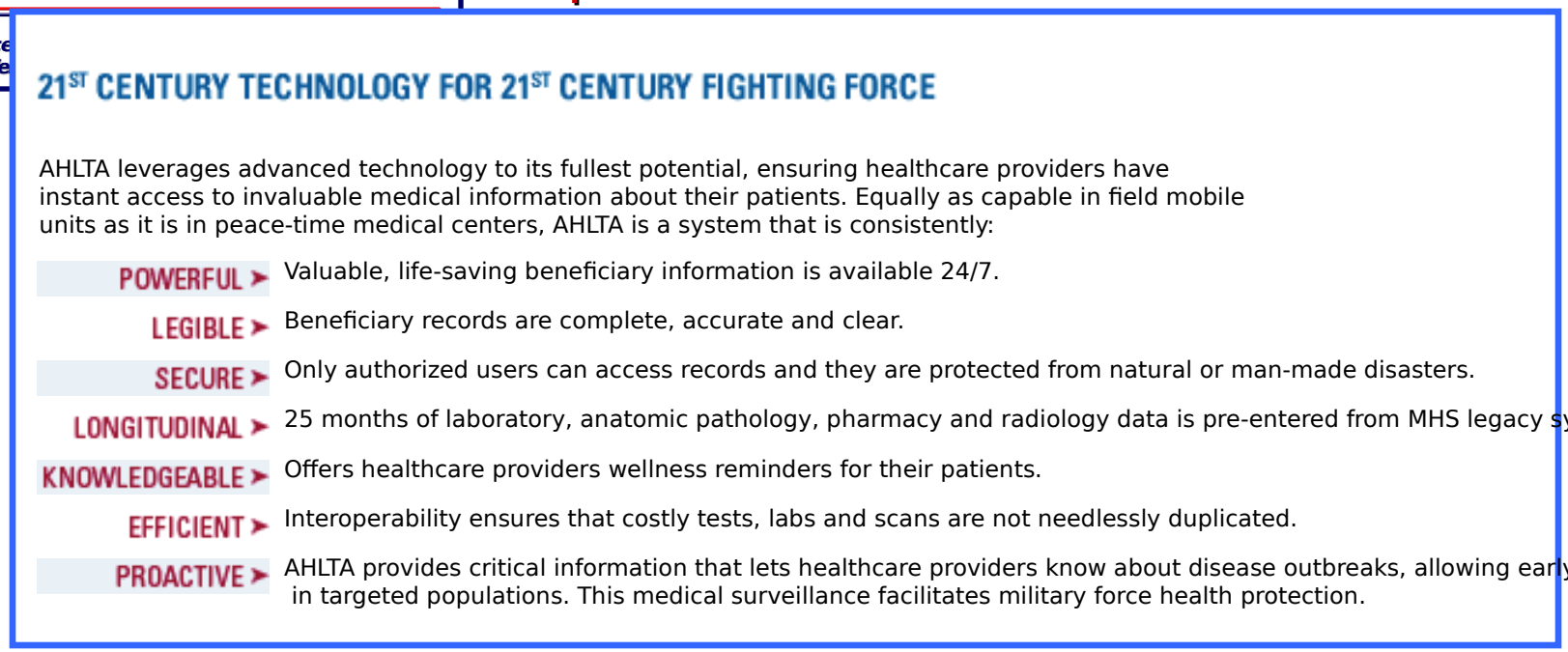
We are Changing to Match Your Needs!

Starting 14 March…for 'Same-Day' Care…

- Soldiers visit
  MON, TUE, WED, FRI 0745 – 0900
  On THU We Close in the Morning for Warrior Medic Training
- Soldiers no longer need to call from 0630 – 0730.
- Soldiers do need a 'Sick Slip' signed by Chain of Command.

Families & other beneficiaries may call for a convenient appointment starting at 0730.

Committed to Exce
Nurturing We



21ST CENTURY TECHNOLOGY FOR 21ST CENTURY FIGHTING FORCE

AHLTA leverages advanced technology to its fullest potential, ensuring healthcare providers have instant access to invaluable medical information about their patients. Equally as capable in field mobile units as it is in peace-time medical centers, AHLTA is a system that is consistently:

POWERFUL ➤	Valuable, life-saving beneficiary information is available 24/7.
LEGIBLE ➤	Beneficiary records are complete, accurate and clear.
SECURE ➤	Only authorized users can access records and they are protected from natural or man-made disasters.
LONGITUDINAL ➤	25 months of laboratory, anatomic pathology, pharmacy and radiology data is pre-entered from MHS legacy sy
KNOWLEDGEABLE ➤	Offers healthcare providers wellness reminders for their patients.
EFFICIENT ➤	Interoperability ensures that costly tests, labs and scans are not needlessly duplicated.
PROACTIVE ➤	AHLTA provides critical information that lets healthcare providers know about disease outbreaks, allowing early in targeted populations. This medical surveillance facilitates military force health protection.

Transitioning while Flying

- **Minimize Short Term Impacts**
  - **Acute Care on Legacy System for 60 days**
- **Empower the Users**
  - **Select Champions**
  - **Orientation & Operating**
- **Train, Train, Train**
- **Share Resources Openly**
  - **Email Help Group & Shared Network Folder**
  - **CHCS II Template Conventions**

Staying on Course

- **Measure Progress**
  - **Utilization, Productivity & Access**
- **Recognize Successes Along the Way**
  - **Healthy Competition**
  - **Consolidate Gains (We are Here!)**
- **Institutionalize New Practices**
  - **Incorporating HN Care**
  - **Templates & Peer Review**
  - **It’s the Definitive Record!**

Measure Utilization

52%

Of All AMEDD Workload Now Completed Using CHCS II

Encounters Completed in AHLTA

	Training End Date	Minimum of **75%** encounter completion at conclusion of MTF's training	Minimum of **85%** encounter completion 6 months following completion of MTF training	CHCS II Completed Encounters			Current Status (31 Oct 05)
				Aug 05	Sep 05	Oct 05	
Redstone Arsenal	10/11/2004	78%	93%	88%	93%	98%	12
Heidelberg	05/06/05	69%	(11/06/2005)	89%	94%	97%	5
Lee	2/20/2004	37%	21%	86%	94%	93%	20
Landstuhl	7/01/2005	80%	(1/01/2006	85%	91%	91%	4
Eustis ("Beta" Site)	6/27/2003			88%	90%	90%	28
Wuerzburg	9/15/2005	88%	(03/15/2006)		88%	88%	1
Sill	12/6/2004	39%	78%	78%	80%	88%	10

Data Excluded from All Sites: Substance Abuse and SRP

Meeting target

Improved or limited decrease (<2%) from previous month or highest utilization rate – Not yet at target

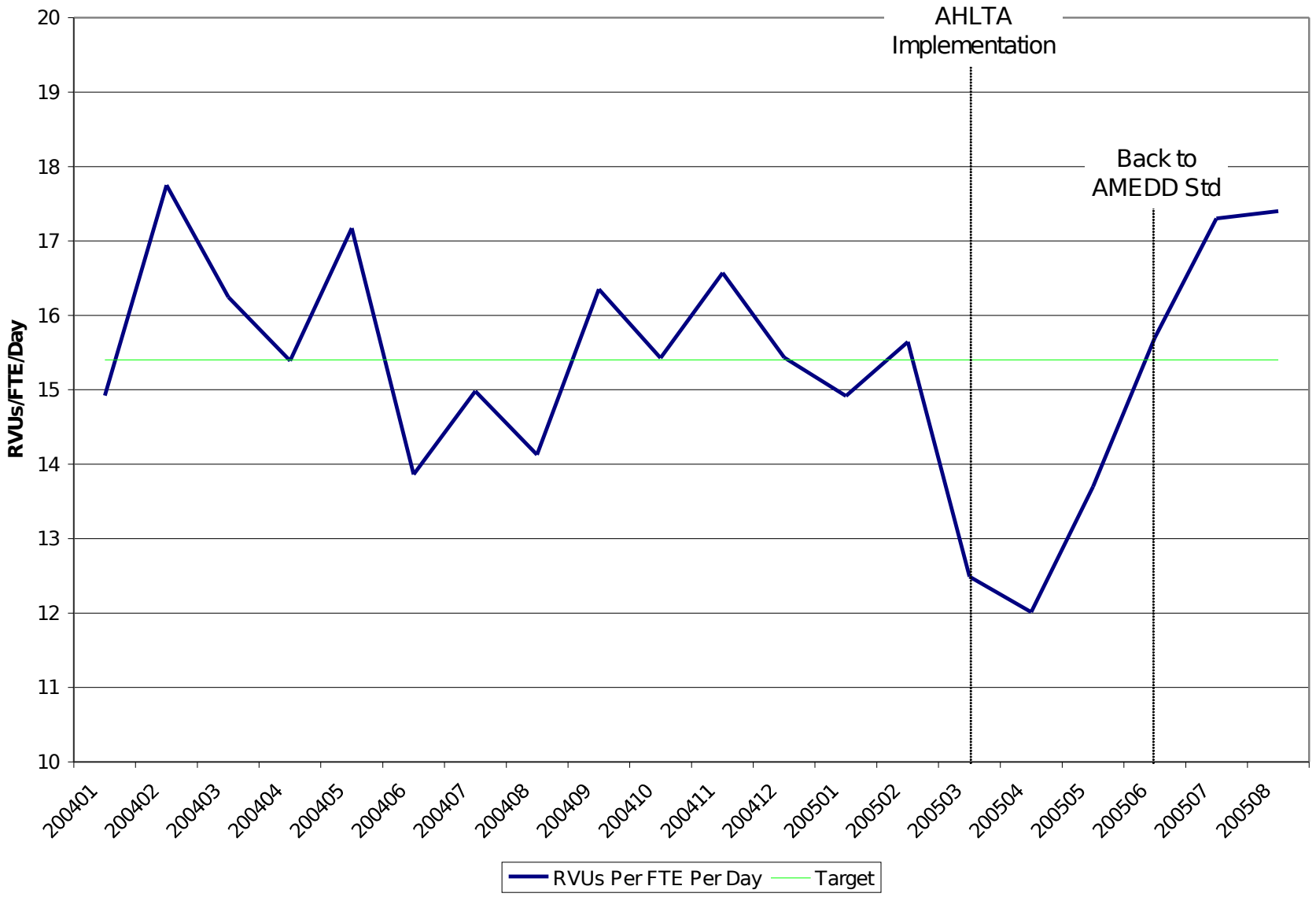
No improvement or significant decrease (>2%) from previous month or highest utilization rate – Not yet at target

Number in each icon reflects months since completion of training

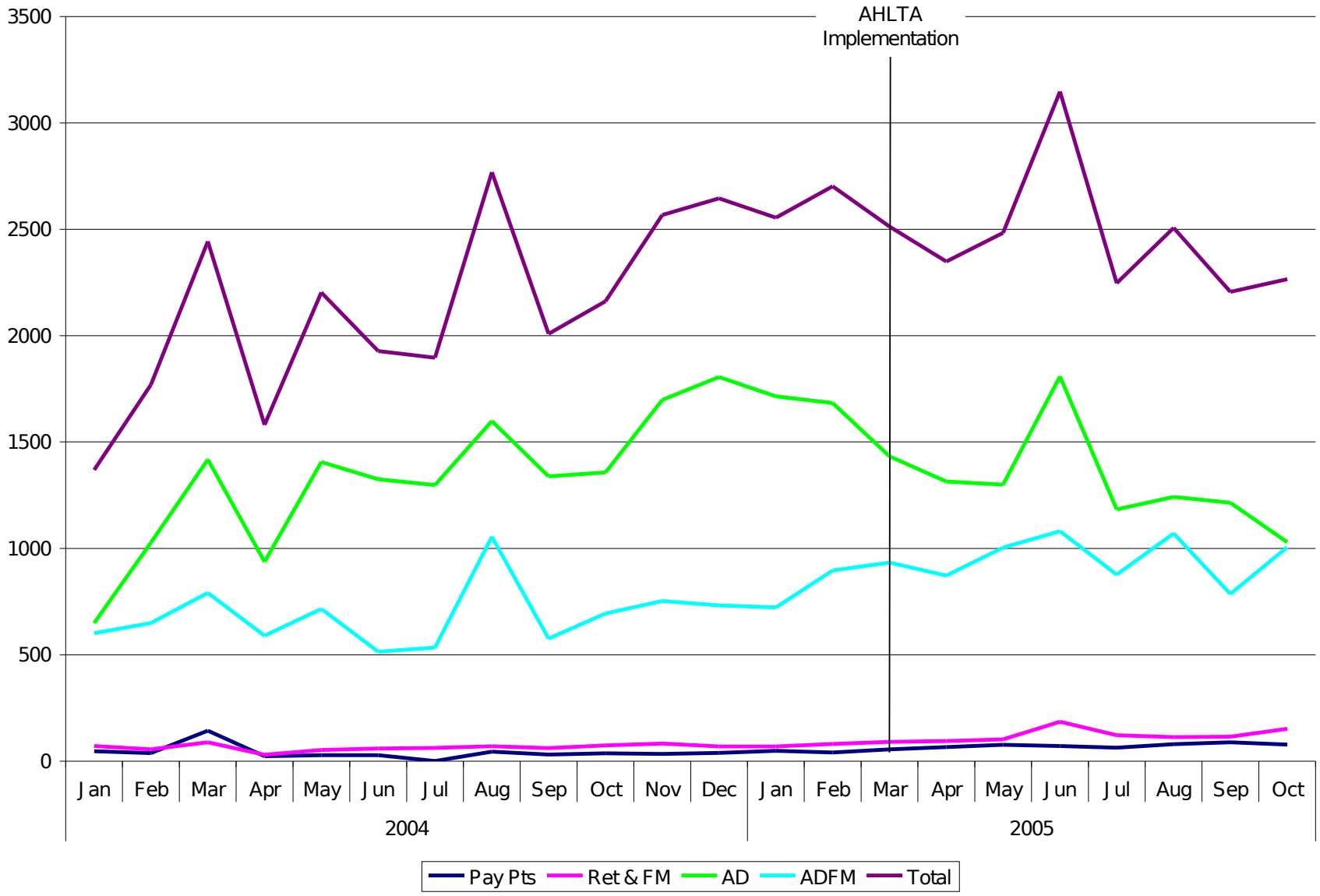
Measure Utilization

8998 AHC DARMSTADT	BDAJ	Pediatrics Clinics	0	502	502	100%
	BFEB	Social Work Clinic	0	72	72	100%
	BFEK	Social Work Clinic	3	59	62	95%
	BGAE	Family Practice Clinic	0	230	230	100%
	BGAK	Family Practice Clinic	0	7	7	100%
	BHAK	Primary Care Clinics	16	1102	1118	99%
	BHFK	Community Health Clinic	0	59	59	100%
	BLAK	Physical Therapy Clinic	0	302	302	100%
	FBIK	Immunizations	5	616	621	99%
	FBNK	Hearing Conservation Program	6	2	8	25%
AHC DARMSTADT Total			**30**	**2951**	**2981**	**99%**
Heidelberg Total			**963**	**27360**	**28323**	**97%**

Measure Productivity



Measure Access



Lessons Learned

- **AHLTA Implementation is a Journey, not a Destination**
- **Champions are Critical; they are the Pathfinders**
- **Not just new IT, but a Clinical Practice Transformation**
- **Providers must Embrace new Practice & Chart a Consistent Course**
- **Never Underestimate the Value of Creating a Shared Vision**

Wrap Up & Questions

The quality of a person's life is in direct proportion to their <u>commitment to excellence</u>…

--Vince Lo

Individual <u>commitment to a group effort</u> - that is what makes a team work, a company work…

--Vince Lombardi